•		PART B	- FEE(S) TRA	NSMITTAL		
SEP : 0 1 2006	this form, together w		or <u>Fax</u>	Commissioner for P.O. Box 1450 Alexandria, Virg (571)-273-2885	r Patents inia 22313-1450	
maintene unless activated be	espondence including the lelow or directed otherwise	in Block 1, by (a)	E FEE and PUBLI lers and notification specifying a new	correspondence address	; and/or (b) indicating a sep	or domestic mailings of the
CURRENT CURRESPONDENCE	ADDRESS (Note: Use Block 1 for	any change of audiess)		Fee(s) Transmittal. The	is certificate cannot be used al paper, such as an assignme e of mailing or transmission.	for any other accompanying
3624 759 VOLPE AND KO UNITED PLAZA, S 30 SOUTH 17TH S	ENIG, P.C. SUITE 1600			Cell I hereby certify that the States Postal Service addressed to the Mai	ritificate of Mailing or Tran- nis Fee(s) Transmittal is bein with sufficient postage for fin Il Stop ISSUE FEE address PTO (571) 273-2885, on the c	g deposited with the United est class mail in an envelope above, or being facsimile
PHILADELPHIA, I				Joshua	B. Ryan	(Depositor's name)
09/05/2006 EAYALEW2 0000	00052 10759835			Park	s.Mr	(Signature)
01 FC:1501 02 FC:1504	1400.00 OP 300.00 OP				August 29,	
OB FC:6001: ATION NO.	FILING D 30::00 OP	F	IRST NAMED INVE	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/759,835 TITLE OF INVENTION: SO	01/16/2004	METUOD FOR F	Chun-Chen Che		DEE-PT147	8293
TITLE OF INVENTION: SO	CKET STRUCTURE AND	, METHOD TOKT	ORMING THE BA			
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	09/01/2006
EXAMI	NER	ART UNI	Т	CLASS-SUBCLASS		
CHUNG TRANS	S, XUONG MY	2833		439-736000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of or agents OR, alto (2) the name of a registered attorned	single firm (having as any or agent) and the name at attorneys or agents. If	ant attorneys 1 2 Volpe 2 volpe 1 ses of up to	& Koenig, P.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Advance Order - # of Copies _

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Delta Electronics, Inc.

Taoyuan Shien, Taiwan

Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

4a. The following fee(s) are enclosed:	4b. Payment o
☑ Issue Fee	A check
Publication Fee (No small entity discount permitted)	N Paymen

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number ______ (enclose an extra copy of this form).

Change in Entity Status (from status indicated above)
 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date Aug

24, 2006

Typed or printed name Joshua B. Ry

Registration No. 56,438

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PTO/SB/21 (09-04) Approved for use through 07/31/2006. U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/759.835 Filing Date TRANSMITTAL January 16, 2004 First Named Inventor **FORM** Chun-Chen Chen Art Unit 2833 Examiner Name **Xuong My Chung Trans** (to be used for all correspondence after initial filing) Attorney Docket Number DEE-PT147

Tota	I Number of	Pages in This Submission					
			EN	CLOSURES (Check	all that apply)	
X		smittal Form		Drawing(s) Licensing-related Papers			After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences
	Extension Express A Informatio	fter Final ffidavits/declaration(s) n of Time Request Abandonment Request on Disclosure Statement Copy of Priority	Ren	Petition Petition to Convert to a Provisional Application Power of Attorney, Revoca Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on marks	e Address	PTC	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): DL-85
		SIGNA	TURE	OF APPLICANT, ATT	ORNEY, C	R AG	ENT
Firm N	ame	VOLPE AND KOENI	G, P.0	C.			
Signati	ure	ASBA	2				
Printed	i name	Joshya B. Ryan					
Date		August	29,	2006	Reg. No.	56,43	38
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CERTIFICATE OF TRANSMISSION/MAILING

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Date

August 29, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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ees suant to the	Consolidated Appropria	tions Act, 2005 (H.R. 4818).
FFF	TRANS	tions Act, 2005 (H.R. 4818).

For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,730.00

Complete if Known						
Application Number	10/759,835					
Filing Date	January 16, 2004					
First Named Inventor	Chun-Chen Chen					
Examiner Name	Xuong My Chung-Trans					
Art Unit	2833					
Attorney Docket No.	DEE-PT147					

Check Credit Card	METHOD OF PAYMEN	T (check all	that apply)					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below	Check Credit Card Money Order None Other (please identify):							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee Charge any additional fee(s) or underpayments of fee(s) Charge fee(s) indicated below, except for the filling fee Charge any additional fee(s) or underpayments of fee(s) Charge fee(s) indicated below, except for the filling fee Charge any additional fee(s) or underpayments of fee(s) Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee Charge fee(s) indicated below, except for the filling fee EXAMINATION FEES Fee (\$) Fee	Denosit Account	Deposit Account Deposit Account Number: 22-0493 Deposit Account Name: Volpe and Koenig, P.C.						
Charge any additional fee(s) or underpayments of fee(s) Variance and 2.7 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES Fee (S) Fee					y authorized to	: (check all that	at apply)	
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Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 0 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claims over 3 (including Reissues) Multiple dependent claims Total Claims Total Claims HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$) Fee Paid (\$)	Design	200	100	100	50	130	65	
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Other (e.g., late filing surcharge): Issue Fee, Publication Fee and 10 advance soft copies 1730	Non-English Specification. \$130 fee (no small entity discount)							
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SUBMITTED BY				
Signature	Addison	Registration No. (Attorney/Agent) 56,438	Telephone 215-568-6400	
Name (Print/Type)	Joshua B. Ryan		Date 8 29 06	

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